

Montgomery County Elanning Department PO Box 643 Troy, NC (910) 576-0043

REZONING REQUEST

In order for your rezoning request to be processed, you must pay a one time, non-refundable fee of \$150.00. This fee covers the cost of advertising in the *Montgomery Herald* for two consecutive weeks and for notification of adjacent property owners by certified letter.

All sections of the request must be **filled out** COMPLETELY or your request will not be processed.

You must also supply a **copy of a tax map** showing the surrounding property. The map should show the general area in relation to neighborhoods, streets ect.

You should also supply a **copy of a plat map** that can be obtained at the Register of Deeds. This plat should be of the property requesting the rezoning.

You **must attend** the Planning Board and County Commissioner's meetings. The Planning Board meetings are held the 4th Monday of the month at 7pm. The County Commissioner's meetings are held on the 1st and 3rd Tuesday of the month at 6pm. Both meetings are held in the commissioner's room in the County Administration Building.

If you have any concerns regarding this request, please feel free to contact the County Planning Department.

REZONING REQUEST

Please print or type		Date		
Non-refundable rezoning fee of		has been paid	Receipt #	
Applicant	Address	Ph	Phone number	
Property Owner	Address	Ph	one number	
I, (we) the undersigned Montgomery County C	commissioners to ame	end the County Zon	ing Map.	
The property in consider	eration is located at _			
between	an	d		Streets.
Current Zoning	Propos	sed zoning		
The property is approx attached tax map and s		acres in size	e as represented b	y the
The rezoning of the pro	operty is necessary in	that:		
The new zoning distric effected area in that:				
Adjacent zoning distric				

Directions from Troy to the property in question			
	oning district will not only permit my intended use, but others not conflict with the surrounding neighborhood in that:		
	persons, firms, or corporations owning property adjacent to, ne property requesting rezoning.		
Name	Mailing Address		
	f the development of the property if the rezoning request is		
	mation contained within this application, will result in the s case by any representative of the County Planning		
knowledge. I do understand that the failure to comply wi Commissioners to repeal the must attend the Planning B	at the above information is true and accurate to the best of my that certain restrictions may apply to the above request and ith those restrictions or conditions may cause the rezoning approval. I understand that a representative or I coard and County Commissioners meetings. I submit to the Commissioners this request for rezoning.		
	Date		
Owne	Date		